

Prob12B
D/NV Form
Rev. June 2014

United States District Court
for
the District of Nevada

**REQUEST FOR MODIFICATION
TO CONDITIONS OF SUPERVISION WITH CONSENT OF OFFENDER**
Probation Form 49 (Waiver of Hearing) is Attached
July 2, 2024

Name of Offender: **DeShawn Walker**

Case Number: **2:15CR00011**

Name of Sentencing Judicial Officer: **Honorable James C. Mahan**

Date of Original Sentence: **June 1, 2016**

Original Offense: **Ct 2: Armed Bank Robbery; Ct 3: Brandishing of Firearm in Furtherance of a Crime of Violence**

Original Sentence: **96 Months prison, followed by 60 Months TSR.**

Name of Assigned Judicial Officer: **Honorable James C. Mahan**

PETITIONING THE COURT

☒ To modify the conditions of supervision as follows:

1. **Mental Health Treatment** – You must participate in an [Outpatient] mental health treatment program and follow the rules and regulations of that program. The probation officer will supervise your participation in the program (provider, location, modality, duration, intensity, etc.).

CAUSE

By way of case history, Mr. Walker was sentenced to 96 months prison followed by a five (5) year term of supervised release for committing the offense of Armed Bank Robbery and Brandishing of Firearm in Furtherance of a Crime of Violence. Mr. Walker commenced supervision on December 6, 2021.

On June 28, 2024, Mr. Walker tested positive for the use of marijuana and cocaine. Mr. Walker admitted to the undersigned officer that he was using marijuana on a regular basis for the past

RE: DeShawn Walker

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couple of months. Mr. Walker denied the use of cocaine. Mr. Walker was verbally reprimanded for the above violation and was advised of possible consequences if the behavior continues. In response to the above violation, the probation office has increased the frequency of his drug testing.

On July 1, 2024, Mr. Walker reported to the U.S. Probation Office to discuss his recent violations of supervision. During the conversation, Mr. Walker admitted he was struggling with mental health issues and requested help from the probation office. The above modification is respectfully requested to assist Mr. Walker with his mental health stability. Mr. Walker has agreed to the proposed modification and waived his right to both a hearing and attorney. The Probation Form 49 is attached for the Court's review.

On July 1, 2024, the undersigned officer also addressed Mr. Walker's delinquent payments towards restitution. Mr. Walker's last payment towards restitution was on February 16, 2021. Mr. Walker was instructed to resume \$100 monthly payments immediately. Mr. Walker was further advised that failure to make monthly payments towards his financial obligations could result in Court intervention.

At this time, the probation office respectfully requests that Mr. Walker's conditions of supervision be modified to include mental health treatment. Should the Court seek a different course of action to address Mr. Walker's needs, please advise the undersigned officer.

Respectfully submitted,



Digitally signed by Erica
Hogans
Date: 2024.07.08 09:06:36
-07'00'

Erica Hogans
US Probation Officer

Approved:



Digitally signed by Joy
Gabonia
Date: 2024.07.03 07:49:32
-07'00'

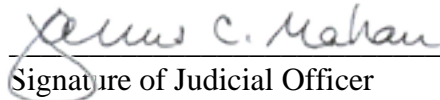
Joy Gabonia
Supervisory United States Probation Officer

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THE COURT ORDERS

- ☐ No Action.
- ☐ The extension of supervision as noted above.
- ☒ The modification of conditions as noted above
- ☐ Other (please include Judicial Officer instructions below):



Signature of Judicial Officer

July 8, 2024

Date

PROB 49
(3/89)

UNITED STATES DISTRICT COURT

District of Nevada

Waiver of Hearing to Modify Conditions of Probation/Supervised Release or Extend Term of Supervision

I have been advised and understand that I am entitled by law to a hearing and assistance of counsel before any unfavorable change may be made in my Conditions of Probation and Supervised Release or my period of supervision being extended. By "assistance of counsel," I understand that I have the right to be represented at the hearing by counsel of my own choosing if I am able to retain counsel. I also understand that I have the right to request the court to appoint counsel to represent me at such a hearing at no cost to myself if I am not able to retain counsel of my own choosing.

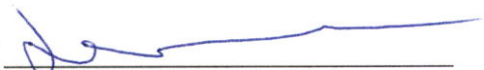
I hereby voluntarily waive my statutory right to a hearing and to assistance of counsel. I also agree to the following modification of my Conditions of Probation and Supervised Release or to the proposed extension of my term of supervision:

Mental Health Treatment – You must participate in an [Outpatient] mental health treatment program and follow the rules and regulations of that program. The probation officer will supervise your participation in the program (provider, location, modality, duration, intensity, etc.).

Witness


U.S. Probation Officer

Signed


Probationer or Supervised Releasee

Date

7-1-24